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FILING DATE

CMAIL DUTITY

02/19/2004

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) James E. Eakin

P.O. Box 1250

APPLICATION NO.

APPLN. TYPE

10/783.880

Menlo Park, CA 94025

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2502187-991100

Cora Baliton
(Malutan)
June 12, 2007 f Date FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO Tobin C. Island

TITLE OF INVENTION: Self-Contained, Eve-Safe Hair-Regrowth-Inhibition Apparatus and Method

ISSUE FEE

			100000111011160	TOTAL PERSON DOE	DATEUGE
Nonprovisional	Yes	\$700	\$300	\$1000	09/06/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	1	
JOHNSON III, HENRY M		3739	606-009000	•	
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56). SQL Change of correspondence address lot of Change of Correspondence Address from PTO/SB/12.2 stached. Gardress from PTO/SB/12.2 stached. Gardress from the Correspondence Address from the Correspondenc			For printing on the patent front page, li the names of up to 3 registered pater or agents OR, alternatively,		F Fakin
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE

Advance Order - # of Copies

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SpectraGenics, Inc.

5880 West Las Positas Blvd, Suite 52, Pleasanton, CA 94588

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🎴 Corporation or other private group entity 👊 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): M Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted)

Payment by credit card. Form PTO-2038 is attached. 21 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-35/6 (onclose an extra copy of this form).

5. Change in Entity Status (from status indicated above) 2 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature ______ Amila & Elekun Date _ June 12, 2007

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